WEST VIRGINIA DIVISION OF LABOR 1900 KANAWHA BOULEVARD EAST CAPITOL COMPLEX, BUILDING 3, ROOM 200 CHARLESTON, WEST VIRGINIA 25305

WAGE PAYMENT SURETY BOND FOR LIMITED LIABILITY COMPANY, LIMITED LIABILITY PARTNERSHIP, CORPORATION OR OTHER BUSINESS ENTITY

Authorized by W. Va. Code §21-5-14(c)

| | BOND N | UMBER | | |
|------------|--|------------------------------|------------------------------------|---------------------------|
| | KNOW ALL MEN BY THESE PRESEN | TS THAT (1) | | |
| | | Na | ame of Principal | |
| □ limi | ited liability company $\ \square$ limited liability par | tnership corporation | \square other business entity | |
| (2) | the | e Principal, and (3) | Name of Surety | , as Surety, |
| license | ed to do business in the State of West Virg | inia by the Office of the | Insurance Commissioner, bin | nd ourselves, our heirs, |
| execu | tors, administrators, successors, and assig | ns, jointly and severall | y, to the West Virginia Division | of Labor in the full |
| amour | nt of (4) dollars (5 | 5 | _) to secure and guarantee th | e payment of wages |
| and fri | inge benefits of the Principal's employees. | | | |
| | The Principal is engaged in (5) \square cons | struction work or \Box the | severance, production or train | nsportation of minerals, |
| and is | required by the Wage Payment and Colle | ction Act, W. Va. Code | §21-5-14, to furnish this wag | e bond. As long as the |
| Princip | pal honors its statutory responsibility to pa | y employee wages an | d fringe benefits when they a | re due, no claim will be |
| made | against this bond. If the Principal defaults | or otherwise fails to pa | y employee wages and fringe | benefits as required by |
| | age Payment and Collection Act, the Sure | • | | |
| | this bond upon the Principal's default or fa | | | |
| | The continuing nature of this bond is su | | - | f 1 year from the hond's |
| offocti | ve date unless the Surety gives written no | • | • | - |
| | | - | | |
| | on of Labor and the Principal that the Su | ety intends to cancer | the bond by days after the p | ost-marked date of the |
| writter | n notice. | tl O-Uti A | at and the lastelatine outs on | |
| " — | Pertinent sections of the Wage Paym | | • | _ |
| | oyer Wage Bonds," 42 CSR 33, are expres | | | |
| this bo | ond. The effective date of the bond is the (6 | 3)day of | , | · |
| | IN WITNESS WHEREOF, the said Prince | cipal has hereunder se | t its hand and affixed its seal, a | and the said surety has |
| cause | d its corporate name to be signed hereto a | nd its corporate seal to | be hereunder affixed by its du | uly authorized officer or |
| agent | and executed this the (7) c | of | · | |
| 8) | | 9) | | |
| - 7 | Principal | | Surety Corporation | |
| | Complete Address of Principal | | Address of Surety Corporati | on |

| I el | ephone Number of Principal | | Phone Number of Surety Corporation |
|-------------------------------------|--|--------------------|---|
| S | ignature of Principal | 11) | Signature of Surety |
| Ρſ | rincipal's Seal | 13) | Raised Surety Seal |
| on | f the principal has not adopted a seal, ne may be drawn by printing the name of the ompany and the word "SEAL" and circling them | | W.Va. Code §2-2-6 requires a raised or embossed seal. |
| | | | |
| owle | edgment by Principal if LLC or Corporation | | |
| owle 4) | edgment by Principal if LLC or Corporation State of | | |
| 4) | |) | |
| 4) 5) | State of |), to-wit: | , a Notary Public in and for the county |
| | State of County of |), to-wit: | , a Notary Public in and for the county |
| 4) 5) 6) | State of County of I, and state aforesaid, do hereby certify that |), to-wit: | · |
| 4) 5) 6) 7) | State of County of I, and state aforesaid, do hereby certify that who, as |), to-wit: | |
| 44) 55) 63) 77) 83) | State of County of I, and state aforesaid, do hereby certify that who, as |), to-wit: | , signed the writing above or hereto annexed, |
| 44) 55) 66) 77) 88) | State of |), to-wit: | , signed the writing above or hereto annexed, |
| 4) 5) 7) 7) 3) yy sa | State of |), to-wit: | , signed the writing above or hereto annexed, a corporation, has this day, in ct and deed of said corporation. |
| 4) 5) 6) 7) 3) y sa | State of | riting to be the a | , signed the writing above or hereto annexed,, a corporation, has this day, in ct and deed of said corporation. |

| 24) | State of |) |
|------|---|---|
| 25) | County of |), to-wit: |
| 26) | I, | , a Notary Public in and for the county |
| 27) | and state aforesaid, do hereby certify that | , who, as Attorney of Fact |
| 28) | Title | , signed the writing above or hereto annexed, for |
| 29) | Name of Surety Company | , a corporation, has this day, in my |
| said | county before me, acknowledged the said writing | g to be the act and deed of said corporation. |
| 29) | Given under my hand this day of _ | , 20 |
| 30) | Notary Public | |
| 31) | My Commission Expires | · |
| 32) | Notary Seal | |
| | Approved as to sufficiency | of form and manner of execution this |
| | day of | , 20 |
| | Attorney General of | of the State of West Virginia |
| | Ву: | |

***Please note that page 4 must be completed before the bond can be approved by the Attorney General.

EMPLOYER'S AUTHORIZATION TO MAKE A DEMAND FOR PAYMENT UPON THE SURETY BOND FOR FAILURE TO PAY EMPLOYEE WAGES AND FRINGE BENEFITS

| | , as the Employer engaged in \square constr | uction | | | | | | |
|--|--|--------|--|--|--|--|--|--|
| Printed Name work or □ the severance production or transportation | of minerals, understand that I am required by the Wage Paymer | nt and | | | | | | |
| Collection Act, W. Va. Code §21-5-14, to furnish a wag | | it and | | | | | | |
| · · · · · · · · · · · · · · · · · · · | | whon | | | | | | |
| I understand that as long as I honor my statutory responsibility to pay employee wages and fringe benefits wher they are due, the Division of Labor will not make a demand upon the wage bond. If I default or otherwise fail to pay | | | | | | | | |
| | | | | | | | | employee wages and fringe benefits as required by the Wage Payment and Collection Act, I further understand that the Division of Labor will make a demand on the Surety for payment under the bond. I hereby expressly authorize the Division |
| | | | | | | | | |
| | as necessary to pay employee wages and fringe benefits that a | e due | | | | | | |
| and owing. | making to many any law as warms and friends have files the County by | 41 | | | | | | |
| - | gation to pay employee wages and fringe benefits, the Surety ha | | | | | | | |
| • | of wages and fringe benefits it has paid to the Division of Labor | on my | | | | | | |
| behalf. | | | | | | | | |
| | | | | | | | | |
| Original Signature | Date*** | | | | | | | |
| | | | | | | | | |
| State of) | | | | | | | | |
| County of | y-wit | | | | | | | |
| · | | | | | | | | |
| l, | , a Notary Public in and for | | | | | | | |
| the county and state aforesaid, do hereby certify that | | _, | | | | | | |
| | | | | | | | | |
| who, as | , signed the writing above or hereto annexed, | | | | | | | |
| for | , a corporation, has this day, in | | | | | | | |
| | | | | | | | | |
| my said county before me acknowledged the said writing | ng to be the act and deed of said corporation. | | | | | | | |
| | | | | | | | | |
| Given under my hand this day | of, 20 * | ** | | | | | | |
| | | | | | | | | |
| | <u></u> | | | | | | | |
| Notary Public | | | | | | | | |
| My Commission Expires | | | | | | | | |
| N. C. I | | | | | | | | |
| Notary Seal | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | lease note this form must be signed before a Notary Public. | | | | | | | |
| The si | ignature date and the acknowledgment date must match. | | | | | | | |